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Bib Data Sheet

CONFIRMATION NO. 5508

SERIAL NUMBER 10/782,649	FILING OR 371(c) DATE 02/19/2004 RULE	CLASS 370	GROUP ART UNIT 2619	ATTORNEY DOCKET NO. CIS03-58(8290)
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APPLICANTS

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**** CONTINUING DATA ***** No n o**

**** FOREIGN APPLICATIONS ***** No n o**

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/12/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS <u>27</u> <u>24</u>	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	<i>Robert H. Wilson RHW</i> Examiner's Signature	Initials			

ADDRESS

58406

TITLE

Method and apparatus for reliable multicast distribution

FILING FEE RECEIVED 1412	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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